

CANDIDATE'S SPECIAL REPORT

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(to be filed by a candidate or the principal campaign committee)

This form is filed during the 20 day period immediately preceding an election to report (1) all receipts from a single source in excess of \$500 by major office candidates, or in excess of \$250 by district or any other office candidates, and/or (2) any payments exceeding \$200 to any person who endorses candidates and who is required to file campaign finance disclosure reports.

All candidates who have had any such transactions within the 20 days immediately preceding an election are required to report any such transaction on this form within 48 hours of the time the transaction occurred.

Hand deliver or mail to: CAMPAIGN FINANCE, 8401 United Plaza Blvd., Suite 200, Baton Rouge, LA 70809-7017.

1. Qualifying Name and Address of Candidate

JOHN C. DAVIDSON

C/O DAVIDSON CAMPAIGN FOR JUDGE

1535 JACKSON STREET

ALEXANDRIA

LA 71301

2. Office Sought (include title of office as well as parish, city, town and/or election district)

DISTRICT JUDGE, DIVISION D

ALEXANDRIA, LA, RAPIDES PARISH

OFFICE USE ONLY

Spec 7/04
10/15

0405720

3. Name and Address of Principal Campaign Committee

(Applicable only if candidate has a principal campaign committee)

Please see attached sheets.

4. Date of Primary Election

Date of General Election 11/02/2004

5 a. Name of Person Preparing Report

b. Daytime Telephone

Please see attached sheets.

6. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

Dated: 10/15/2004

Signature of Candidate/Chairperson (To be signed by Chairperson only if report by principal campaign committee)

Signature of Treasurer, if any

3184429532
Daytime Telephone Number

3184429533
Daytime Telephone Number

LOUISIANA
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
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Name and Address of Person Preparing Report MARK S. MCKAY, C.P.A. 1407 PETERMAN DRIVE ALEXANDRIA LA 71301 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee
Daytime Telephone (Preparer): 318-442-1608	Rel of Aff. Org. to Comm:
Name and Address of Principal Committee DAVIDSON CAMPAIGN FOR JUDGE 1535 JACKSON STREET ALEXANDRIA LA 71301 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:
Name and Address of Chair Person JIMMY FAIRCLOTH, JR. PO BOX 12730 ALEXANDRIA LA 71315-2730 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:

SCHEDULE A: CONTRIBUTIONS (Including In-Kind Contributions)

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MAJOR OFFICE CANDIDATES: The following information must be reported for all contributions and in-kind contributions exceeding \$500 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

DISTRICT OFFICE CANDIDATES AND ANY OTHER OFFICE CANDIDATES: The following information must be reported for all contributions and in-kind contributions exceeding \$250 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

1. Name and Address of Contributor (& Description if in-kind)	2. Contributions this Reporting Period		3. Valuation if In-Kind
	a. Date(s)	b. Amount(s)	
ALEXANDRIA CHIROPRACTIC CLINIC 5501 COLISEUM BLVD. ALEXANDRIA LA 71303	10/16/2004	600.00	0.00
ROY O. MARTIN III 6231 LANDMARK DR. ALEXANDRIA LA 71301	10/15/2004	1000.00	0.00